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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/017,454
Filing Date	12/13/01
First Named Inventor	Cao
Art Unit	
Examiner Name	
Attorney Docket Number	5061

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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OR

<input checked="" type="checkbox"/> Firm or Individual Name	CAO Group, Inc.		
Address	4358 South Skyhawk Drive		
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Name	Daniel McCarthy	Registration No.	36,600
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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